

## City of Grants Pass

Liability Release Form

PUBLIC WORKS DEPARTMENT
101 NW A Street #205
Grants Pass, Or 97526

**541-450-6110** FAX: 541-479-6765 www.grantspassoregon.gov

## ADOPT-A-STREET PROGRAM-Group

I have reviewed the safety information and am aware of dangers involved in participating in the Adopt-		
A-Street Program as described by the City of Grants Pass. I am participating with group through		
, for		
Applicant's Name	Street Name	

Further, I understand that I will be responsible and liable for damage or injury to any persons or property resulting from my actions during this activity.

I indemnify, hold harmless and release the City of Grants Pass, its employees, agents and representatives, against any and all damages, claims, demands, actions, causes of action, costs, and expenses of whatsoever nature as a result of my actions during this activity and will notify the City of Grants Pass in the event a third party is injured as a result of this activity.

I the undersigned participant, acknowledge that I have read and understand the above Release.

## It is not necessary to list children's names.

PRINT PARTICIPANT'S NAME	PARTICIPANT'S SIGNATURE	DATE
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